

## PART B - FEE(S) TRANSMITTAL

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7590

12/11/2003

Jeffrey C Hood

~~Conley Rose & Tayon PG Meyertons Hood Kivlin Kowert &~~

PO Box 398

Austin, TX 78767

Goetzal, P.C.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Jeffrey C. Hood	(Depositor's name)
<i>[Signature]</i>	(Signature)
3/8/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/551,291

04/18/2000

Brett B. Stewart

5285-04800

2017

TITLE OF INVENTION: DISTRIBUTED NETWORK COMMUNICATION SYSTEM WHICH ENABLES MULTIPLE NETWORK PROVIDERS TO USE A COMMON DISTRIBUTED NETWORK INFRASTRUCTURE ~~INFRASTRUCTURE~~

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1330

\$0

\$1330

03/11/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
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DU, THUAN N

2185

709-200000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Meyertons Hood Kivlin Kowert & Goetzal, P.C.
2. Jeffrey C. Hood
- 3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Wayport, Inc.

Austin, TX

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 4

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(Authorized Signature)

*[Signature]*

(Date)

3/8/2004

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02 FC:8001

12.00 DA

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